SFB BR 900-08

Project Application Form

Building Renewal Grant Application

Initial Submission Date: Resubmittal Date:		Application ID: 693
Please provide as much o information that is not cu	f the requested information as possible. SFB starrently available.	aff will assist in developing required
District Name:	St David Unified District	
Superintendent:	Mr. Mark Goodman	
Contact Person:	Rocky Warner	
Contact Phone Number:	(520)720-8040	
Contact Email:	rwarner@stdavid.org	
School Site:	St David High School	
Buildings:		
north end of shingle roof Need to repair and replace Project Category: Roofi Are any of the above-des		S.
Available Funding		
	nbered building renewal fund balance (Fund 690 funds planned for this project	\$0.00 \$0.00
Please outline any associa	ited insurance coverage.	
Liaison: Demland	ddemland@azsfb.gov	602-542-6567
Superint	tendent Printed Name	_
 Superint	tendent Signature	 Date

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